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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) X-1449 US	
	In re Application of Scott J. Campbell		
	Application / Conf. Number 10/799,183 / 8162		Filed March 12, 2004
	For Parallel Keystream Decoder		
	Art Unit 3621	Examiner Pierre E. Elisca	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 120.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ _____
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17 (a)(5))	\$ _____
<input type="checkbox"/>	Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.	
<input type="checkbox"/>	A check in the amount of the fee is enclosed.	
<input type="checkbox"/>	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.	
<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>24-0040</u> . I have enclosed a duplicate copy of this sheet.	

I am the applicant/inventor

assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record.

attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a). 37,652.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

10/3/05
Date


Signature

Kim Kanzaki, 37,652

Typed or printed name

10/11/2005 TBESHAKI 00000027 240040 10799183

02 FCB 1251 120.00 DA

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, P.O. Box 1450, Alexandria, Virginia, 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia, 22313-1450.